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WILLIS G. TUCKER, M. D.
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THE
INTRODUCTORY ADDRESS
OF THE
COURSE OF 1886-87
AT THE
ALBANY MEDICAL COLLEGE,

DELIVERED SEPTEMBER 21, 1886,

BY

F. C. CURTIS, M.D.,
Professor of Dermatology.

PUBLISHED BY THE CLASS.



ALBANY, N. Y.:
BURDICK & TAYLOR, PRINTERS, 481 BROADWAY,
Publishers of Albany Medical Annals.
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CORRESPONDENCE.

ALBANY MEDICAL COLLEGE, *October 6, 1886.*

Prof. F. C. CURTIS:

At a meeting of the senior class of the Albany Medical College, the undersigned were appointed a committee to request of you, for publication, your Introductory Address, delivered September 21, 1886.

Very respectfully,

THOMAS H. WILLARD,
C. W. DEBAUN,
F. W. ST. JOHN,
JOHN A. HEATLY.

ALBANY, *October 7, 1886.*

Messrs. THOMAS H. WILLARD, C. W. DEBAUN, F. W. ST. JOHN and
JOHN A. HEATLY, *Committee:*

Gentlemen—I take great pleasure in complying with the request, conveyed in your kind note, for a copy of this year's Introductory Address for publication.

Please express to the class my thanks for the compliment, and believe me,

Very truly yours,

F. C. CURTIS.

GLIMPSES OF EARLY MEDICINE IN ALBANY.

INTRODUCTORY ADDRESS OF THE FIFTY-SIXTH SESSION OF THE ALBANY MEDICAL COLLEGE.

As we to-day inaugurate the opening of the fifty-sixth session of the Albany Medical College, it becomes my pleasing duty, as the representative of the Faculty, to extend a welcome to those who have assembled to avail themselves of the opportunities which this institution has to offer for medical study. There are few changes in the college to note. This occasion, however, brings to mind the recollection of the death of two who a year ago were associated with us—Dr. N. L. Snow and Dr. Henry March. As one of the Board of Curators, whose duty it is to pass the final verdict upon the fitness of students to receive their diplomas, Dr. Snow's kindly, yet conscientious, presence will be missed, as also his words of practical advice at the surgical clinic in which, as one of the surgeons of the Albany Hospital, he participated. He was held by the medical profession here to be one of our best advisers in surgery and medicine. Dr. March came less directly into contact with the classes, but as curator of the Museum, of which his distinguished father furnished the nucleus and most important part, the specimens brought before you have been a daily reminder of him. No one could have a more ardent love for the college and profession, and the memory of no member of it will be more tenderly cherished.

All the world knows that this year Albany has celebrated its bi-centennial as a chartered city. This old Dutch city, in which you have assembled for another year of instruction, is the oldest surviving European settlement in this country; for, although it is a long way back in the annals of the new world to July 22, 1686, when its charter was granted, it was in that charter referred to as an "ancient town," seventy-five years having

elapsed since the little colony of Dutchmen erected a trading house here and laid the foundation of this large city, with its extensive merchandise, its homes of refinement, its asylums and hospitals and its many educational institutions. Your future *Alma Mater*, which, through its own lengthy history, has been fostered in many ways by the old city, asks you to give it the deference this morning which is the due of worthy old age. Albany deserves much for its cherishing care of education. The Albany Academy, erected by the city in 1815, in which the theory of the magnetic telegraph was first demonstrated by Prof. Joseph Henry, and where Dr. T. Romeyn Beck, a former member of the faculty of this college and the author of medical jurisprudence as a science, long served as principal, stands as a fine monument of its early regard for education. The Female Academy, whose imposing front adorns North Pearl street, dates back to the same period. This building which we now occupy as a medical college was erected by the city in 1817, to be used as a free school, long before the common school system of the state arose to supersede it. And, of more recent date, the city takes a justifiable pride in its large number of public schools, most liberally endowed; its private schools and academies, which, some of them, have a national reputation; its schools of technical instruction; the special departments of Union University here located; the public libraries and literary and scientific associations, which make Albany a notable centre of learning and speak highly for its fostering care, throughout its history, for education.

As our meditations naturally revert to the past on this bi-centennial year, a few glimpses at the conditions and events of early medical affairs here will not be ill-timed.

The pioneer settlements of the New World offered few attractions to physicians who had passed through the long courses of training which, two or three centuries ago, were considered requisite in the universities of Leyden, Padua, Paris, Aberdeen, Cambridge and Oxford. The care of the sick fell, therefore, upon those who were the most intelligent among the community, and it was quite common in all the American colonies for the government officials, schoolmasters and clergymen to give some attention to medicine and to become a little versed in its art or its domestic traditions. The Dutch West India Company, to which Albany owes its earliest existence, has the

reputation of having been especially careful in making provision for the health of their sailors and colonists, and one of their regulations for the latter was that a so-called "comforter of the sick" should be provided. Usually the person serving in this capacity was one of their government officials, and the very first person on record as charged with the care of the sick here was Sebastian Jansen Crol, a worthy individual, who, besides medical and clerical duties as comforter of the sick, and I know not what else, was vice-director of Fort Orange. It was common for one man in those early times to fill a great many offices. Several of the Dutch dominies are known to have been familiar with the theories and practice of the times, and it is not unlikely that, as missionaries do now-a-days, they gave the matter study before leaving for the New World. Dr. Mancius, who, at an advanced age, was a practicing physician here at the beginning of this century and was one of the founders of the Medical Society of the County of Albany, received his medical education from his father, the Rev. Georgius Mancius, who two hundred years ago adorned both professions, preaching and practicing in this vicinity. Dominie Megapolensis, noted as the first clergyman to come to this colony, of which he was for twenty-five years a resident, and one of the most prominent in the early annals of Albany, also had some repute in physic. Of his sagacity in it, however, I have my doubts, for, from some things in his writings, I think, not unlike some practitioners to-day, he was too inclined to run after novelties, recommending to the Dutch vrouws very questionable procedures which he found in vogue among the Indians.

While it is probable that even up to the beginning of the present century there were comparatively few who devoted themselves exclusively to the practice of medicine, the physician being also a minister, farmer, merchant or mechanic, adapting himself to the frugal and primitive mode of life of the colonists, nevertheless from the earliest times there were regularly educated physicians here.

Surgeon Abraham Staats deserves mention as the first regular practitioner to come here from Holland; he was sent, with a ship-load of emigrants, by the first Patroon, in 1642, the same vessel bringing also the first minister, Rev. Dr. Megapolensis. He filled out a long life here, in a way worthy of emulation, being an enterprising citizen in various capacities, civil and military, as

was the necessary custom at a time when good men were very scarce. He was undoubtedly a reputable practitioner, though of this not much is recorded, his practice taking up but a modicum of his time probably, since his clientele could not have been very extended, Albany (or Beverwyck) then consisting of but twenty-five or thirty houses built along the river in proximity to the little log fortification known as Fort Orange. The people were, moreover, hardy pioneers, little likely to give way to sickness. Spinal irritation, dyspepsia from late suppers, malaria, nervous exhaustion, hysteria, laziness, and the like, were wisely reserved for a time when doctors were more numerous, and the "mind cure" was not the latest social fancy. I do not believe there was any dilettanteism in his practice. Somebody was certainly downright sick whenever the doctor was called up at night.

Besides Surgeon Staats, the pioneer of the profession, but two or three other physicians are mentioned in the first century of the history of Albany. In 1666 a Frenchman—De Hinse—was surgeon to the fort, and twenty years later he was succeeded by a Scotchman, named Lockhart, both coming here from Holland. The position they held was worth, it may be mentioned, 2s. 6d. per diem. Dr. Johannes de la Montagne was for a time vice-director of Fort Orange, and his name is associated with the earliest medical legislation, it being ordered that "ship-barbers shall not be allowed to dress wounds nor administer any potion on shore" without his consent. The names of less than forty physicians are known, during the seventeenth century, in the entire province of New York, and of these one writer unkindly, but no doubt veraciously, says that "by far the greater part are mere pretenders to a profession of which they are entirely ignorant."

It is worthy of note that this region was regarded by those who came to it as both fair and salubrious. Many instances are related of cures of consumption among those coming to the new country. Indigenous fevers were rarer here than in the New England or Virginia colonies, but epidemics of imported diseases were not escaped, and of these small-pox was frequently terrible in its ravages. Its reputation for healthfulness was maintained in later years, in evidence of which the longevity of the inhabitants is instanced, and I find the statement that in the winter of 1785 there was but one burial in the old Dutch church-

yard, and that was a case of death from accident, a child having been run over by a sleigh.

The eighteenth century was characterized by the occurrence of two extensive wars—the French war and the war of the Revolution. This city was central to important fields of both, and was the headquarters of the Northern Department of the Continental Army; of necessity it participated to a large degree in both of them. For the first hundred years of its existence the new country had been dependent upon Europe for its education in medicine. These wars gave a new impulse to the profession by the opportunities for instruction and study which they afforded, as well as by the demand they created for skilled medical officers. A war thus always does much to develop the medical science of a country. In the French war the English army was accompanied by a highly respectable medical staff, which contributed much to the education of many young Americans, especially through the military hospitals which were established. One of these was erected here, and thus early in its history Albany became a centre of medical education. It is probably the same one that existed during the Revolutionary war, and is described by Dr. Thacher, who was connected with the latter army, as situated “on an eminence overlooking the city,” containing forty wards and capable of accommodating five hundred patients. It is this hospital that is referred to on the bi-centennial tablet on the site of the old Green street theatre, and was located where the Lutheran church now stands, on the corner of Pine and Lodge streets.* A large barn belonging to Madam Schuyler was also used as a hospital during the French war, and was filled with wounded troops who poured into Albany from the disastrous field of Ticonderoga. There was also a military cantonment across the river, at Greenbush, during the Revolution, which was maintained until 1822. But with all these the city was hardly able at times to meet the demands made upon it, the Dutch church and private houses being sometimes used as hospitals. After Burgoyne’s defeat at Saratoga, Albany was filled for months far beyond its capacity with the wounded of both armies, not less than a thousand of these victims of war being thrown into the city, keeping thirty

*It is extraordinary that in the annals of Albany so little mention is made of this important edifice and that it is hardly spoken of except in connection with a theatrical company who in 1769 were allowed to act in it. It was well worthy of a bi-centennial tablet to mark its site.

surgeons constantly employed. Thacher speaks highly of the skill of the English surgeons, who attended their own troops and whose operations he often witnessed, but he had the poorest opinion of the Germans, who looked after the Hessians.

Both of these wars contributed a number of good medical men to this city who settled here at their close. Dr. Samuel Stringer, who served in both wars, being director-general of hospitals in the northern department of the Revolutionary army, filled out a long life here after the war was over; Dr. Nicholas Schuyler, an ardent patriot and intelligent surgeon; Dr. Hunloke Woodruff, a graduate of Princeton and highly esteemed as a learned physician; Dr. J. Cochran, director-general of the Hospitals of the United States during part of the war; and the brothers Willard, who were of New England birth and received their medical training in the military hospital in Boston under Dr. John Warren; these, with others whom it would now be neither pertinent nor possible to catalogue, composed and gave character to the profession of Albany at the close of the eighteenth century.

Albany, then an ancient city indeed, having fourteen years before celebrated its centennial, had a population of about five thousand. A Dutch city, modeled after the provincial towns of Holland, its habits, physiognomy, architecture, people, horses and dogs were Dutch. There were not more than five families, a historian states, that were not Dutch. Dr. Thacher, himself a New Englander, found them unsocial to strangers, disinclined to outside innovations, perfectly contented with themselves and their surroundings and indifferent to foreign criticism. There were no pavements on the streets, and while I freely acknowledge that some we have now are worse than none, yet our ways in this respect are being rapidly mended; there were no street lamps (though one is to be seen in the picture of Albany in 1805, at what was then the head of State street); sewers were not known, and swine were the public scavengers.

The late war had, however, brought strangers in; the iconoclastic yankee had found his way here; the Erie canal was talked about; railroads, on the highway of which Albany stands, were later developed, and with them the commerce and manufacture, which have added twenty-fold to the population in this century.

This was also a notable epoch in medicine. Hitherto the *theories* of different men had characterized its history; these were

beginning to give way to *observed facts*, upon which basis of study the far-seeing Hippocrates attempted long ago to place it. The collateral sciences were beginning to receive exact study; contributions to physiology, anatomy and surgery were being made by John Hunter, Scarpa, Bichat, Cheselden and Pott, and to obstetrics by the eminent Frenchman, Baudelocque. William Cullen and John Brown had aroused new interest by their writing and teaching, and Jenner, who has saved more lives than any other human being, had just published to the world his immortal discovery of vaccination.

Prior to this time the means of education had been very limited, and the mass of the profession in this country were doubtless very ignorant of scientific medicine. Occasionally one went to Europe for study, to Leyden especially in the early part of the eighteenth century, where Boerhave was the shining light, and later to Edinburgh to listen to the teaching of Cullen, who, it is said, was the first to break away from the established custom of lecturing in Latin, for which innovation most of my highly esteemed colleagues, as well as myself, are grateful. The standard of preparation was necessarily high, at least in scholastic knowledge, for the text-books were written in Greek and Latin, and after a long course of study graduates were required to publish and defend a thesis written in one of these learned languages. It is really a wonder that medicine ever made any progress with this hamper of scholasticism about it, although the dead languages have been to so recent a time the medium of expression in the German universities that even yet some of the older polyglot professors fall into them with bewildering proficiency. It is easy to see that the doors of the European universities were of necessity shut to the majority of those who in this new world proposed to study medicine.

In this country, the Medical College of Philadelphia, now the Medical Department of the University of Pennsylvania, was established in 1765. A little earlier than this a course of lectures on anatomy was begun in New York, by Dr. Samuel Clossy, a Dublin graduate, and Drs. Middleton and Bard dissected before their students the body of a criminal, which is noted as the first instance of anatomical demonstration. In 1767 the medical department of Kings (now Columbia) College was developed; Harvard College established the third medical department in 1782, and Dartmouth in 1797, these constituting the medical

schools of this country at the beginning of this century. Except to those in their immediate vicinity they were almost as inaccessible as if they had been in Europe, and by far the larger part of the profession at this time had never seen a medical college. Dr. T. Romeyn Beck states that there were then not probably over twenty practitioners in this state who held a medical degree. Of the thirteen physicians who organized the Medical Society of the County of Albany, in 1806, one was a graduate of Edinburgh, three graduated at Philadelphia, and one in New York, they being the young men of the time.

In fact, medical education was procured chiefly in another way, that is, by a system of apprenticeship. This was followed even by young men of good preparatory education and possessed of ample means. They entered into an indenture for a term of years, contracting that they should be taught medicine and surgery, and in return were to give their time to study and serving their preceptor as he might require. I imagine that much of their time was spent in wielding the pestle and compounding out of crude herbs the unappetizing mixtures largely in vogue, the vivid memory of which Dr. Holmes has brought down from his nursery life in association with the venerable family physician who, he says, "would look at the tongue, feel of the pulse and shake from his vials a horrible mound of ipecac or a revolting heap of rhubarb, good stirring remedies that meant business, but which left a flavor behind them that embitters the recollections of childhood." Nevertheless, this apprenticeship plan produced many good, practical physicians a hundred years ago. In the course of time the student absorbed the knowledge of his teacher and learned, moreover, the ways of the man in facing the ills of humanity, and I can easily believe that this way of learning medicine had many peculiar advantages, and that the student of to-day would gain much if it were made a serious part of his own preparation to practice medicine.

It would be interesting, if the limited time of this occasion permitted, to trace out what constituted a medical education at that time. Compared with to-day, the science of medicine was little developed. There was very little opportunity to study medicine by dissection, and, in fact, to the indentured student it was certainly impossible; there was hardly a public hospital in this country; pharmacy was but a rude science; the art of diagnosis in medicine and surgery was very rudiment-

ary, and most of our instruments of precision and research were unknown. There were but two medical periodicals published in this country—the *Medical Repository* and the *Medical and Physical Journal*—files of which are in our college library. The contrast between the medicine of then and now is best shown by its accomplishments. In midwifery the death-rate has been reduced from one death in 100 to one in perhaps 300; in surgery there is an estimated gain of 35 per cent.; and the total of life in civilized countries has been lengthened 25 per cent. in the course of this century.

The steps which led up to this would fill volumes, and I cannot detain you with allusions to them, nor to more modern epochs in our medical history. But with us the present reaches almost back to this particular period, for the century was only in its twenty-first year when the Albany Medical College legitimately began its existence, in the course of lectures on anatomy with demonstrations, by one of the fathers of American surgery, Dr. Alden March, whose portrait looks down upon us this morning. There were then, besides the four colleges I have mentioned, but eight or nine others organized in this country, and half of these are now extinct. In the faculties of two of them, Fairfield and Castleton, Dr. March, and also Drs. James H. Armsby and James McNaughton, of this city, were leading members. This course of lectures, often encountering serious opposition, was carried on, with the assistance of Dr. Armsby, until after years of effort, by public lectures and the coöperation of the best citizens, the college was fully organized with an able corps of instructors, a good museum, since grown to be one of the most complete in the country, and a library, now especially rich in rare old books of the early time.*

*The following medical schools were in existence prior to the commencement of Dr. March's lectures in 1821: University of Pennsylvania, organized in 1765; Harvard University Medical School, organized in 1782; Medical Department of the University of North Carolina, organized in 1796 (now extinct); Dartmouth College Medical Department, organized in 1797; Medical Department of Columbia College, organized in 1767 (extinct in 1813); College of Physicians and Surgeons, New York city, organized in 1807; School of Medicine of the University of Maryland, organized in 1807; Medical Department of Yale College, organized in 1810; College of Physicians and Surgeons of the Western District of New York, Fairfield, organized 1812 (extinct 1840, graduated 589); Medical Department of Queen's College, New Jersey, organized 1814 (extinct 1816); Medical College of Ohio, organized in 1819; Medical College of Transylvania University, organized in 1817 (extinct 1859); Vermont Academy of Medicine, Castleton, organized in 1818 (extinct 1861); Medical Department of Bowdoin College, organized in 1820.

In addition to these, the following were organized prior to the full incorporation of the Albany Medical College in 1838: The National Medical College, Washington, organized in 1821; Medical Department of the University of Vermont, organized in 1823; Medical Col-

In these glimpses of a time long gone by, I dare say our predominating reflection is upon the contrast between the poverty of resources then and the abundance that we possess now. But, without questioning the fuller results that we are able to secure to-day, I nevertheless have found that there were medical men of large ability and certainly of great accomplishment in the olden time. It seems as if we would be disarmed for the contest if we were deprived of the means which the nineteenth century has contributed, but, after all, there was good work done by the generations before us, and many physicians lived and practiced just as acceptably, and perhaps as successfully, then as now.

In reviewing the past, one lesson has been impressed upon me—that there are some elements that go to make up a successful practitioner that a medical school can hardly supply. Hippocrates said that four qualities are indispensable to a good physician—learning, sagacity, humanity and probity. The personal method of the apprenticeship plan was more likely to furnish all of these, and it would be well for the students of to-day, while struggling through the “mysteries and miseries of science” in pursuit of the first, to also cultivate the other three.

Sagacity digests learning and makes it an available possession; it leads you to see the world and men, not through others' eyes, but through your own; to study a sick man, not simply a disease; to be a counsellor, not simply a dealer in potions, to ticket off diseases and remedies; to appreciate that nature is a good physician and that “drugs are not the real curative agents provided by a higher beneficence;” that general principles will not serve as a substitute for common sense. A merely learned man is an impractical pedant; a sagaciously wise man is a tower of strength.

As to humanity, one would suppose that it would be a predominant quality in a physician, and generally it is, but there are physicians so brutal and rough that, as someone says, an indictment for assault and battery would hold against them. My ideal physician is gentle and forbearing, conscious that he

lege of South Carolina, organized in 1824 (extinct 1839); Medical Department of McGill University, Quebec, organized in 1824; Medical Department of the University of Virginia, organized in 1825; Jefferson Medical College, organized in 1826; Medical School of the Valley of Virginia, organized in 1826; Medical College of Georgia, organized in 1829; Medical College of Louisiana, organized in 1831; Medical College of the State of South Carolina, organized in 1833; Medical Department of the University of Louisville, organized in 1837.

has to deal with those whose sensibilities are not covered by their normal integument. A happy disposition and an assuring manner—such is the power of the mind over the body—often does more than the whole pharmacopœia. In a recent medical journal, a writer (and not a sentimental one) says that “the very thought of joyous, grateful, happy children’s faces which I have seen repays me for months of labor.” Few occupations carry such remuneration. And the spirit of humanity ought to extend to the community. As Dr. Gross says, “the great question of the day is not this operation or that, not ovariectomy or lithotomy, but preventive medicine.” Here is a great chance for philanthropy.

Then, as to probity, while I know it it sometimes said that humbug is essential to the successful practice of medicine, I want to say that nowhere ought there to be more truth and reality. “To assume gravity as a mask, and mystery as a domino, to cover a plentiful lack of knowledge,” in the words of St. Clair McKelway, “is the mark of quackery.” This is the sentiment of the best part of the profession. Quackery may bring, very possibly, the most success, if money is to be its measure, but there are other measures of success besides money, even in America. Money is hardly earned at the expense of manhood. No one can begin too young to practice thoroughness, instead of sham and superficiality; truth is a virtue in whose train the other virtues follow, in the display of all of which no one in the community should go beyond the physician.

I do not believe in natural-born generals nor natural-born doctors, who have had no proper training, but I do believe that a successful and valued life has been spent by many a one in the past, who, with but a modicum of science, has supplemented its lack by those large qualities of the head and heart that Hippocrates said are indispensable. They have not necessarily been lives spent in a large place, and very likely the world has never perused their printed pages nor been conscious of their existence. It is quite likely that some rural hamlet has been so favored as to enjoy a generation of such a life.

Those of the class who purpose to settle in a place of not less than 96,000 inhabitants will hold such sentiments, doubtless, as these which Dr. Holmes has put into the mouth of one of his characters in “Elsie Venner”: “Oh, yes! country doctor—half a dollar a visit—ride, ride, ride, all day—get up at

night and harness your own horse—ride again ten miles in a snow storm—shake powders out of two vials—(pulv. glycyrrhiz., pulv. gum acac. aa part. equales)—ride back again, if you don't happen to get stuck in a snow drift—no home, no peace, no continuous meals, no unbroken sleep, no Sunday, no holiday, no social intercourse, but one eternal jog, jog, jog in a sulky, till you feel like the memory of an Indian who has been buried in a sitting posture, and was dug up a hundred years afterward."

This is only a half picture. It should be offset by the pleasures of the summer, when the roadside is aglow with flowers and redolent with sweet odors and pulsing with all the sounds of nature. What opportunities for reflection the long rides afford. Some of the most sagacious physicians I have ever met have been country practitioners. Then, in his own circumference how large his influence, how autocratic may be his power, with no rival to dispute his sway. What opportunities for good are before him to the individual, the family and the community. If he is true to all the possibilities of his place, he will be the most fully trusted, the most heartily loved man in the community, and when he passes away his memory is treasured by the generation that lives after him. Ideals are seldom realized, but it is always good to keep alive the ideal. In our profession no one holds so lowly a place but that he may aspire to its truest reward, and none so exalted but that he may be humbly grateful if he has attained them all. It is an aspiration for any man to worthily win and worthily wear the ancient and honorable name of Physician.

